

**CERTIFICATION OF DEBTOR
REGARDING MONTHLY REPORT**

Debtor: _____
Chapter 13 Case No.: 18-10107

SADIE B. PEREE

I, SADIE PEREE, declare under penalty of perjury that the following information is true and correct:

I am the business debtor in the above referenced matter.

I have completed and attached a Monthly Financial Report for the month of JUNE, 2018

All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

Date: 7-11-18

Sadie B. Perree
Debtor

****YOU ARE REQUIRED TO COMPLETE A MONTHLY FINANCIAL REPORT FOR FIRST MONTH YOU FILED FOR BANKRUPTCY AND RETURN IT IMMEDIATELY WITH THE OTHER ATTACHED PAPERWORK.***

***** YOU ARE ALSO REQUIRED TO FILL OUT MONTHLY FINANCIAL REPORTS FOR EACH AND EVERY MONTH AFTER YOU FILED YOUR PETITION UNTIL YOUR PLAN IS CONFIRMED BY THE COURT. PLEASE MAKE PHOTOCOPIES OF THE ATTACHED MONTHLY FINANCIAL REPORT FORM, AS NEEDED.***

****** FAILURE TO PROVIDE THE MONTHLY FINANCIAL REPORTS AS STATED ABOVE WILL HOLD UP THE CONFIRMATION OF YOUR CASE AND POSSIBLY CAUSE YOUR CASE TO BE DISMISSED.***

Lessor Name: SADIE REES
 Case No: 18-10107
 Business Name: _____
 For the Month & Year (1/05, etc.): JUNE, 2018

BUSINESS INCOME:
 Actual Income from Sales & Service \$ 900
 Other (Specify) \$ _____
 Other (Specify) \$ _____
 Total Actual Income (1+2+3) \$ _____

ACTUAL BUSINESS EXPENSE PAID
 Rent/Lease \$ _____
 Utilities (Electricity, Gas, Water & Sewer) \$ _____
 Telephone \$ _____
 Insurance \$ _____
 Wages for Employees \$ _____
 Wages for Self/Owner(s) \$ _____
 Taxes \$ _____
 Gas and Fuel for Business Vehicles \$ _____
 Other (Specify) \$ 550
 Other (Specify) \$ _____
 Other (Specify) \$ _____
 Total Actual Business Expenses Paid On \$ 350
 (sum of 5 through 16)

Net Business Income/Loss (line 4-Line 16) \$ _____
 Net Wages From Regular Employment-De \$ _____
 Net Wages From Regular Employment-Sp \$ _____
 Amount Carried Over From Last Month \$ _____
 Total Net Monthly Income (sum of 17 thr \$ _____

PERSONAL
 Rent/Mortgage \$ 750
 Utilities (gas, electric, water, sewer, fuel) \$ _____
 Telephone \$ 20
 Food \$ 170
 Transportation (fuel, tolls, parking) \$ 60
 Other (specify) \$ _____
 Other (specify) \$ _____
 Other (specify) \$ _____
 Other (specify) \$ _____
 Other (specify) \$ _____
 Total Actual Personal Expenses Paid (21) \$ 1000

NET INCOME (LOSS)
 Gross Excess Income (line 21 - line 32) \$ (5650) *DECREASE IN NET INCOME*
 MONTHLY CHAPTER 13 PLAN PAYMENTS \$ _____
 Net Excess Income (line 33 - line 34) \$ _____
 carry amount on line 35 to next month line 20

EXHIBIT D

**CERTIFICATION OF DEBTOR
REGARDING MONTHLY REPORT**

SADIE B. PEREZ

Debtor: _____
Chapter 13 Case No.: _____

I, SADIE PEREZ, declare under penalty of perjury that the following information is true and correct:

- 1 I am the business debtor in the above referenced matter.
- 2 I have completed and attached a Monthly Financial Report for the month of
MAY, 2018
- 3 All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

Date: 7-11-18

Sadie Perez
Debtor

****YOU ARE REQUIRED TO COMPLETE A MONTHLY FINANCIAL REPORT FOR FIRST MONTH YOU FILED FOR BANKRUPTCY AND RETURN IT IMMEDIATELY WITH THE OTHER ATTACHED PAPERWORK.***

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MONTHLY FINANCIAL REPORT OF BUSINESS OPERATIONS

Debtor Name: SADIE PEREN
 Case No. 18-10107
 Business Name: _____
 For the Month & Year (1/05, etc.): MAY, 2018

BUSINESS INCOME:

1 Actual Income from Sales & Service \$ 1000
 2 Other (Specify) \$ _____
 3 Other (Specify) \$ _____
 4 Total Actual Income (1+2+3) \$ _____

ACTUAL BUSINESS EXPENSE PAID

5 Rent/Lease \$ _____
 6 Utilities (Electricity, Gas, Water & Sewer) \$ _____
 7 Telephone \$ _____
 8 Insurance \$ _____
 9 Wages for Employees \$ _____
 10 Wages for Self/Owner(s) \$ _____
 11 Taxes \$ _____
 12 Gas and Fuel for Business Vehicles \$ _____
 13 Other (Specify) \$ 400
 14 Other (Specify) \$ _____
 15 Other (Specify) \$ _____
 16 Total Actual Business Expenses Paid Or \$ 600
 (sum of 5 through 16)

17 Net Business Income/Loss (line 4-Line 16) \$ _____
 18 Net Wages From Regular Employment-De \$ _____
 19 Net Wages From Regular Employment-Sp \$ _____
 20 Amount Carried Over From Last Month \$ _____
 21 Total Net Monthly Income (sum of 17 thr \$ _____

PERSONAL

22 Rent/Mortgage \$ 750
 23 Utilities (gas, electric, water, sewer, fuel) \$ _____
 24 Telephone \$ 20
 25 Food \$ 70
 26 Transportation (fuel, tolls, parking) \$ 160
 27 Other (specify) \$ _____
 28 Other (specify) \$ _____
 29 Other (specify) \$ _____
 30 Other (specify) \$ _____
 31 Other (specify) \$ _____
 32 Total Actual Personal Expenses Paid (22 \$ 1000

NET INCOME (LOSS)

3 Gross Excess Income (line 21 - line 32) \$ (600) *DEFERRED ASSESSMENT (2018)*
 4 MONTHLY CHAPTER 13 PLAN PAYMENT \$ _____
 5 Net Excess Income (line 33 - line 34) \$ _____
 carry amount on line 35 to next month line 20

EXHIBIT D

**CERTIFICATION OF DEBTOR
REGARDING MONTHLY REPORT**

Debtor: _____
Chapter 13 Case No.: _____

SABIE B PEREZ

I, SABIE PEREZ, declare under penalty of perjury that the following information is true and correct:

1. I am the business debtor in the above referenced matter.
2. I have completed and attached a Monthly Financial Report for the month of APRIL, 20 .
3. All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

Date: 7-11-18

Sabie Perez
Debtor

***YOU ARE REQUIRED TO COMPLETE A MONTHLY FINANCIAL REPORT FOR FIRST MONTH YOU FILED FOR BANKRUPTCY AND RETURN IT IMMEDIATELY WITH THE OTHER ATTACHED PAPERWORK.**

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MONTHLY FINANCIAL REPORT OF BUSINESS OPERATIONS

Debtor Name: YARIE B. LOPEZ
 Case No: 18-10107
 Business Name: _____
 For the Month & Year (1/05, etc.): APRIL, 2018

BUSINESS INCOME:
 1 Actual Income from Sales & Service \$ 1350
 2 Other (Specify) \$ _____
 3 Other (Specify) \$ _____
 4 Total Actual Income (1+2+3) \$ _____

ACTUAL BUSINESS EXPENSE PAID
 5 Rent/Lease \$ _____
 6 Utilities (Electricity, Gas, Water & Sewer) \$ _____
 7 Telephone \$ _____
 8 Insurance \$ _____
 9 Wages for Employees \$ _____
 10 Wages for Self/Owner(s) \$ _____
 11 Taxes \$ _____
 12 Gas and Fuel for Business Vehicles \$ 600
 13 Other (Specify) \$ _____
 14 Other (Specify) \$ _____
 15 Other (Specify) \$ _____
 16 Total Actual Business Expenses Paid On \$ 750
 (sum of 5 through 16)

17 Net Business Income/Loss (line 4-Line 16) \$ _____
 18 Net Wages From Regular Employment-De \$ _____
 19 Net Wages From Regular Employment-Sp \$ _____
 20 Amount Carried Over From Last Month \$ _____
 21 Total Net Monthly Income (sum of 17 thr \$ _____

PERSONAL
 22 Rent/Mortgage \$ 750
 23 Utilities (gas, electric, water, sewer, fuel) \$ _____
 24 Telephone \$ 20
 25 Food \$ 70
 26 Transportation (fuel, tolls, parking) \$ 60
 27 Other (specify) \$ _____
 28 Other (specify) \$ _____
 29 Other (specify) \$ _____
 30 Other (specify) \$ _____
 31 Other (specify) \$ _____
 32 Total Actual Personal Expenses Paid (22 \$ 1010

NET INCOME (LOSS)
 33 Gross Excess Income (line 21 - line 32) \$ (4250) *BOOKED WAS OTHER*
 34 MONTHLY CHAPTER 13 PLAN PAYMENTS \$ _____
 35 Net Excess Income (line 33 - line 34) \$ _____
 carry amount on line 35 to next month line 20

EXHIBIT D